

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. RTSP-0100
Applicant(s): M nia and C wsert			
Serial No. 09/763,748	Filing Date May 29, 2001	Examiner J. Schultz	Group Art Unit 1635
Invention: ANTISENSE MODULATION OF TRADD EXPRESSION			
RECEIVED JUN 03 2003 TECH CENTER 1600/2900			
I hereby certify that this <u>Reply under 37 C.F.R. 1.116</u> (Identify type of correspondence)			
is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9307</u>)			
on <u>June 2, 2003</u> (Date)			
<u>Jane Massey Licata</u> (Typed or Printed Name of Person Signing Certificate)			
<u>Jane Massey Licata</u> (Signature)			
Note: Each paper must have its own certificate of mailing.			

AMENDMENT TRANSMITTAL LETTER (Large Entity)				D cket No. RTSP-0100	
Applicant(s): Monia and Cowser					
Serial No. 09/763,748	Filing Date May 29, 2001	Examiner J. Schultz	Group Art Unit 1635		
<div style="position: relative; height: 40px;"> <div style="position: absolute; top: -20px; left: 0; font-weight: bold; font-size: 1.2em;">RECEIVED</div> <div style="position: absolute; top: 0; left: 100px; font-weight: bold;">JUN 03 2003</div> <div style="position: absolute; top: 10px; left: 130px; font-weight: bold; transform: rotate(-15deg);">TECH CENTER 1600/2900</div> </div>					
INVENTION: ANTIDENSE MODULATION OF TRADD EXPRESSION					
TO THE COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	6 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div style="margin-bottom: 10px;"> <input checked="" type="checkbox"/> No additional fee is required for amendment. </div> <div style="margin-bottom: 10px;"> <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ </div> <div style="margin-bottom: 10px;"> <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. </div> <div style="margin-bottom: 10px;"> <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619 </div> <div style="margin-bottom: 10px;"> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. </div> <div style="margin-bottom: 10px;"> <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. </div>					
<i>Jane Massey Licata</i> _____ Signature			Dated: June 2, 2003		
Jane Massey Licata Reg. No. 32,257 Licata & Tyrrell P.C. 66 E. Main Street Marlton, NJ 08053 Tel: 856-810-1515 Fax: 856-810-1454			I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.		
cc:			Signature of Person Mailing Correspondence Typed or Printed Name of Person Mailing Correspondence		

FACSIMILE COVER SHEET

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June 2, 2003

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JUN 03 2003

GROUP 1600

GROUP: 1635

OFFICIAL

FAX NUMBER: 1-703-872-9307

ATTORNEY DOCKET NO.: RTSP-0100

SERIAL NO.: 09/763,748

FILED: May 29, 2001

NUMBER OF PAGES: 9
(including this sheet)

MESSAGE: Attached is a Response to the Final Rejection dated April 2, 2003.

URGENT! PLEASE DELIVER IMMEDIATELY UPON RECEIPT. THANK YOU!

* * * * *

If you have any questions, or did not receive the proper number of pages, or had trouble during transmission, please call 856-810-1515.

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